									Application or Docket Number				
•	PATENT A	RD.											
Effective October 1, 2000									10711487				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALLEN YPE		OR.	OTHER SMALL		
TOTAL CLAIMS							E	RATE	FEE	[RATE	750	
FOR			NUMBER F	LED .	NUMBER EXTRA		٤	BASIC FEE	2432	ÖΒ	BASIC FEE	71000	
TOTAL CHARGEABLE CLAIMS			47 minus 20=		28.			X\$ 9=		ОЯ	X\$18=	534	
INDEPENDENT CLAIMS			4 minus 3 =		1		Ĺ	163	٠, •	OR	SE .	86	
MU	LȚIPLE DEPEN	DENT CLÁIM PI	RESENT				[1485		ÖR	1900		
* If the difference in column 1 is less than zero, enter *0" in column 2										OR	TOTAL	1320	
11-00 CLAIMS AS AMENDED - PART II								SMALL E	NTITY	ÓR	OTHER SMALL		
4		.(Column 1)	BACKSON CONTRACTOR	(Colu	mn 2) KEST	(Column 3)	ır	·310/	ADDI-) [-	ADDI-	
ΑL		REMAINING . AFTER AMENDMENT		. NUN PREVI	BER. OUSLY	PRESENT EXTRA		PATE	TIONAL FEE	. 1	RATE	TIONAL FEE	
AMENDMENT	Total	• 50.	Minus	4	18	. 2		XS CE.		OR	X\$18=	100	
MEN	Independent	. 4	Minue	***	4			X40≥	٠. ٠.	OŖ	A SU		
٢	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+135=		OR	+270=		
						L	+133=.	· · ·		TOTAL	14)		
2/2/0								DDIT. FEE	•	OR	ADDIT, FEE		
_	12/010	(Column 1)	: ************************************		mn 2) HEST.	(Column 3)	} _		ÁDDI-	ı I		ADDI-	
N B		REMAINING AFTER AMENDMENT		NUN PREVI	ABÉR IOUSLY FOR	PRESENT EXTRA	ŀ	RATE	TIONAL FEE	٠.	"RATE	TIONAL FEE/	
amendmenț	Total	. 50	Minus	(50	=] [X\$ 9=.		OR	X\$18=		
É E	Independent	· 2	Minus	***	7	-/	11	X40=	/_	QΑ	X80=		
	FIRȘT PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	I CLAIM] [+135=	7	OR	+270=	/	
	•						L	TOTAL DOIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)												\	
5	e e e e e e e e e	CLAIMS REMAINING		HIG	HEST MBER	PRESENT	ÌГ		ADDI-			ADDI-	
AMENDMENT C		AFTER AMENDMENT		PREV	OUSLY FOR	EXTRA	$\rfloor \lfloor$	RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus			=		· X\$ 9=		ОЯ	X\$18=		
ME	Independent	•	Minus	•••		•	11	X40=		OR	X80=		
 	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J ∤			1	070	1	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3													
	If the Sciences No	mhác Praviousiv S	Pald For IN THE	S SPACE	is less th	an 20, enter "Zi	0." ,	DOTAL		OR	ADDIT. FEE		
***	'll the "Highest M. The "Highest Mu	mber Previously I	Paid For IN TK! ald For (Total o	S SPACE r indepen	: rs less th ident) is th	ızın 3, emzer "3." 18 highest mumi	er fou	ind in the ap	propriate bo	x in o	duma 1.		